Appendix G

Smart Storeroom Phase II

Demonstration IBS Interface

Importing Data into IBS
USS Normandy (CG 60)

RIP Data Only

Integrated Barcode System (IBS) is a database program designed specifically for tracking inventory using barcode scanners. The program stores information in a number of files underneath its program directory. The type of file is dBase5 (*.db).

Most databases save information in a certain format and can be exported to any other format with minor processing. To populate the RIP portion of IBS an Access Master File (*shipdemo.mdb*) was used. *Shipdemo.mdb* uses a module (created in Visual Basic) that creates a table with the same information used in the IBS dBase RIP file (*RIP.db*). After the table is created in shipdemo.mdb the information is exported to a dBase5 format and overwrites the old *RIP.db*.

The data from *shipdemo.mdb* needs to be processed before being exported. The data in Access compared to data in *RIP.db* is shown below.

Access RIP data (scanned directly from Form 1348)
Document Number
NSN
Third barcode

RIP.db data elements:
Document Number
NSN
Route ID
UI
Ship Quantity
Condition Code
COG
Unit Price
UPC
RIP Quantity
User ID
Scanner No
Scan Date
Exp_X71S
Exp_Other
Exp_X72S
Stow_Match
DRA
Scan_Date7
Damage_Ind
Damage_Qty
NIIN
Rec_Type

The Route ID, UI, Ship Quantity, COG, and Unit Price are all part of the third barcode on the 1348. A module inside *shipdemo.mdb* processes the third barcode and splits it into the data needed. All other data elements are either hand entered or are obtained from another barcode that was not needed for these tests and are left blank during the processing.

The barcodes come from many different sources and do not scan the same way. Some of the third barcodes are 20 characters while some are 25. Due to the limited number of 1348's tested, there may be more exceptions. Most exceptions can be handled in the software but require more time and processing.

While not a fully functional program and interface, this demonstration does show the feasibility of interfacing with IBS given proper time and funding that a fully functional IBS program can be created.